



MISSOURI DEPARTMENT OF REVENUE
DIVISION OF TAXATION AND COLLECTION
P.O. BOX 898
JEFFERSON CITY, MO 65105-0898
(573) 751-2326 TDD 1-800-735-2966
CREDIT UNION TAX RETURN

**2001
INT-4**

DLN

2002 TAXABLE YEAR BASED ON THE 2001 CALENDAR YEAR INCOME PERIOD.

DUE BY APRIL 15, 2002

NAME

ADDRESS

CITY, STATE, ZIP CODE

COUNTY

FEDERAL EMPLOYER IDENTIFICATION NUMBER

NOTE: A COPY OF THE NASCUS/NCUA CALL REPORT MUST BE ATTACHED.

PART I

1. Total gross income from NASCUS/NCUA Call Report as of December 31, 2001	1	\$	
ADDITIONS			
2. Recoveries of bad debts	2		
3. Missouri credit union tax	3		
4. Missouri taxes claimed as credits on this return from Schedule A	4		
5. Other additions (attach schedule)	5		
6. Total of Lines 1 through 5	6	\$	

PART II

DEDUCTIONS			
7. Total operating expenses from NASCUS/NCUA Call Report as of December 31, 2001	7	\$	
8. Dividends and interest paid on general shares (NASCUS/NCUA Call Report)	8		
9. Loans charged off as bad debts	9		
10. Other deductions (attach schedule)	10		
11. Total of Lines 7 through 10	11		
12. Taxable income (Line 6 less Line 11)	12	\$	

PART III

COMPUTATION OF TAX			
If apportionment required, see instructions.			
13. Tax — Line 12 multiplied by 7% or from apportionment schedule	13	\$	
14. Tax credits from Line 4 above	14		
15. Tax due (Line 13 less Line 14)	15		
16A. Less tentative payment or amount previously paid	16A		
16B. Miscellaneous credits (attach schedule)	16B		
16C. Enterprise zone credit	16C		
17. Overpayment of previous year's tax (attach approved credit authorization)	17		
18. NET TAX DUE (Line 15 less Lines 16A, 16B, 16C and 17)	18		
19. Plus interest for delinquent payment (see instructions)	19		
20. TOTAL AMOUNT DUE (Line 18 plus Line 19)	20	\$	

MAKE CHECK PAYABLE TO: "FINANCIAL INSTITUTION TAX". SEND COMPLETED RETURN AND REQUIRED ATTACHMENTS TO: DIVISION OF TAXATION AND COLLECTION, P.O. BOX 898, JEFFERSON CITY, MO 65105-0898.

SCHEDULE A — TAXES CLAIMED AS CREDITS	
DESCRIPTION (Do not list tangible personal property tax on leased property)	AMOUNT
	\$
Total (Enter on Lines 4 and 14, Page 1)	\$

SCHEDULE B — POLITICAL SUBDIVISIONS TAXING THE REPORTING CREDIT UNION			
SECTION 1 This must be filled out — Information available from your Real or Personal Property Tax Receipt		SECTION 2 Do not fill out — For State Use	
SUBDIVISIONS	NAME OR NUMBER	RATE	AMOUNT
County			
City or Town			
Road District			
School District			
Library District			
Water District			
Sewer District			
Fire District			
Other Districts			

AUTHORIZATION/NON-AUTHORIZATION	
<input type="checkbox"/> I authorize the Director of Revenue or his/her delegate to discuss my return and attachments with the preparer or any member of his/her firm.	<div>PREPARER'S TELEPHONE</div> <input type="checkbox"/> I do NOT authorize the Director of Revenue or his/her delegate to discuss my return and attachments with the preparer or any member of his/her firm.

SIGNATURE — PLEASE SIGN BELOW			
<p>_____, whose return is herewith submitted, declare that we have read and are familiar with all of the statements contained in this return, including the accompanying schedules (if any) all of which are true and correct, according to our best knowledge and belief, and that this return is a true and complete statement, in accordance with the law, for the taxable year covered.</p>			
SIGNATURE OF OFFICER	DATE	PREPARER'S SIGNATURE (OTHER THAN TAXPAYER)	DATE
TITLE OF OFFICER	PHONE NUMBER	PREPARER'S ADDRESS AND ZIP CODE	FEIN OR PTIN